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CONFIRMATION NO. 6434

|   |   |                                  |   |  |                                |
|---|---|----------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/655,567  | <b>FILING OR 371(c) DATE</b><br>09/04/2003<br><b>RULE</b>   | <b>CLASS</b><br>424              | <b>GROUP ART UNIT</b><br>1653   | <b>ATTORNEY DOCKET NO.</b><br>Furuya Case 1407 |                                |
| <b>APPLICANTS</b><br>Futoshi Okada, Hokkaido, JAPAN;<br>Masuo Hosokawa, Hokkaido, JAPAN;<br>Hiroshi Shionoya, Saitama, JAPAN; <i>ak</i>   |   |                                  |   |  |                                |
| <b>** CONTINUING DATA *****</b> <i>RK</i>   |   |                                  |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b> <i>RK</i><br>JAPAN 2002-259766 09/05/2002  |   |                                  |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/28/2003</b>  |   |                                  |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Allowance<br>Verified and <i>Rosanne Kossin</i> <i>8/22/06</i><br>Acknowledged Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>1  | <b>TOTAL CLAIMS</b><br>6                       | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>23474   |   |                                  |   |  |                                |
| <b>TITLE</b><br>Anti-tumor agent  |   |                                  |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>900   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |